

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>215521331</b>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>The Matrixx Group, Incorporated</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX ROAD, SUITE 285</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>IN</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>4/30/2015</b></p> <p>SCC ID NO: <b>F1749490</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED					
COMMON	1,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 15000 HWY 41 NORTH</p> <p style="margin-left: 40px;">CITY/ST/ZIP: EVANSVILLE, IN 47725</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: KEVIN ANDREWS  TITLE: PRESIDENT  ADDRESS: 15000 HIGHWAY 41 NORTH  CITY/ST/ZIP/CO: EVANSVILLE, IN 47725 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: KEVIN ANDREWS TITLE: PRESIDENT ADDRESS: 15000 HIGHWAY 41 NORTH CITY/ST/ZIP/CO: EVANSVILLE, IN 47725	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY CRITTENDEN DIRECTOR 15000 HIGHWAY 41 NORTH EVANSVILLE, IN 47725	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL HUNTSMAN DIRECTOR 15000 HIGHWAY 41 NORTH EVANSVILLE, IN 47725	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID PARKIN DIRECTOR 15000 HIGHWAY 41 NORTH EVANSVILLE, IN 47725	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID TOPHAM DIRECTOR 15000 HIGHWAY 41 NORTH EVANSVILLE, IN 47725	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GREG KNIPP _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GREG KNIPP, CORP CONTROLLER _____ PRINTED NAME AND CORPORATE TITLE	5/29/2015 _____ DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			